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CERTIFICATE OF FACSIMILE TRANSMISSION

TO: Examiner J. Ulm
Group 1646

I hereby certify that these 27 pages are
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Fax No.: 703-308-4242

Carrie Hines

FROM: David A. Gay
Reg. No.: 39,200

NAME (printed)

OUR DOCKET NO.: 66797-028 (P-IX 1613)

Carrie Hines May 12, 2003
SIGNATURE DATE

REFERENCE: Serial No. 08/471,622

Filed: June 5, 1995

Entitled: SURFACE EXPRESSION LIBRARIES OF HETEROMERIC RECEPTORS

DATE: May 12, 2003

NO. OF PAGES (Including this page): 27

SPECIAL INSTRUCTIONS:

Transmitted herewith are the following **OFFICIAL** documents:

- 1) Supplemental Response to the Office Action mailed August 13, 2002: (15 pages)
- 2) Appendix A: (7 pages)
- 3) Transmittal Form 1083 (in duplicate): (4 pages)

Please contact Carrie Hines at (858) 535-9001 if you DO NOT receive all pages.

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AMENDMENT TRANSMITTAL LETTER			CLIENT-MATTER NO.: 66797-028 (P-IX 1613)
SERIAL NO: 08/471,622	FILING DATE: June 5, 1995	EXAMINER: J. Ulm	GROUP ART UNIT: 1646 CONFIRMATION NO.: 8720
Invention: SURFACE EXPRESSION LIBRARIES OF HETEROMERIC RECEPTORS			

TO: COMMISSIONER FOR PATENTS
P.O. Box 1450
Alexandria, VA 22313-1450

CERTIFICATE OF FACSIMILE TRANSMISSION

I hereby certify that these 27 pages are being facsimile transmitted to the Patent and Trademark Office on the date shown below:

Carrie Hines
NAME (printed)

Carrie Hines May 12, 2003
SIGNATURE DATE

Transmitted herewith is a Supplemental Response to the Office Action mailed August 13, 2002, in the above-identified application.

- X Small Entity status of this application has been established under 37 CFR 1.27.
X Appendix A.
X No additional claims fee is required.
— An additional claims fee is required and has been calculated as shown below:

CLAIMS AS AMENDED

	NUMBER AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR		NUMBER OF EXTRA CLAIMS PRESENTED		RATE			FEE	
							SMALL ENTITY	OTHER ENTITY		SMALL ENTITY	OTHER ENTITY
TOTAL CLAIMS	37	-	75	-	0	x	\$9	\$18	=	\$0.00	\$
INDEPENDENT CLAIMS	5	-	9	-	0	x	\$42	\$84	=	\$0.00	\$
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM			YES		XX NO		\$140	\$280	=	\$0.00	\$
							TOTAL ADDITIONAL FEE			\$0.00	\$

- * If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 20, write "20" in this space.
** If the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 3, write "3" in this space.
*** If the difference between the "NUMBER AFTER AMENDMENT" and the "HIGHEST NUMBER PREVIOUSLY PAID FOR" is less than 0, write "0" in the space.

Inventor: William D. Huse
Serial No.: 08/471,622
Filed: June 5, 1995
Page 2

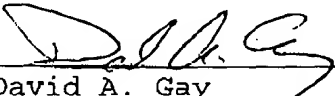
X An extension of time is not necessary because a Response to the Office Action mailed August 13, 2002, was timely filed on January 13, 2003.

— Please charge my Deposit Account No. 502624 the amount of \$_____, \$_____ of which covers the fee for a _____-month extension of time. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge payment of any fees associated with this communication or credit any overpayment to Deposit Account No. 502624. A duplicate copy of this sheet is enclosed.

X The Commissioner is hereby authorized to charge to Deposit Account No. 502624 any fees under 37 CFR 1.17 which may be required under 37 CFR 1.136(a)(3) for an extension of time in any concurrent or future reply requiring a petition for extension of time. A duplicate copy of this sheet is enclosed.

Respectfully submitted,



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